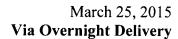
,	STATE OF SO	OUTH CAR	OLI	NA		255	255868			
((Caption of Case)) BEFORE THE) PUBLIC SERVICE COMMISSION) OF SOUTH CAROLINA					
)) (COVER LETTER			
					DOCKET 2015 NUMBER: 2015		- <u>A12</u> - <u>A</u>			
				The state of the s))				
(1	Please type or print)								
S	ubmitted by:	WiMacTel, I	nc.			SC Bar Number:				
A	ddress:	13515 I Circle	e			Telephone:	800-820	0-46	80	
		Omaha, NE 68137				Fax:	877-476-0890			
						Other:	""			
	OTE: The cover of	aget and inform	. 4 !		•	Email:			@wimactel.com	
as	required by law.	This form is rec	quire	contained herein neither rep I for use by the Public Servi	ice C	ommission of South Caroli	g and serv na for the	ice o	of pleadings or other papers	
_be	e filled out complet	ely.		KETING INFORM	~~					
X		orized Utility R	_	sentative		for item to be placed on				
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_	Electric			Affidavit		Letter	кан ша		Request	
	Electric/Gas			Affidavit Agreement		Letter Memorandum	. ali tila			
							X all tha		Request	
	Electric/Gas			Agreement		Memorandum Motion			Request for Certification	
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	Electric/Gas Electric/Telecor Electric/Water	nmunications		Agreement Answer Appellate Review		Memorandum Motion Objection			Request for Certification Request for Investigation Resale Agreement	
	Electric/Gas Electric/Telecor Electric/Water Electric/Water/T	nmunications		Agreement Answer Appellate Review Application		Memorandum Motion Objection Petition			Request for Certification Request for Investigation Resale Agreement Resale Amendment	
	Electric/Gas Electric/Telecor Electric/Water Electric/Water/T	nmunications		Agreement Answer Appellate Review Application Brief		Memorandum Motion Objection Petition Petition for Reconsidera	tion		Request Request for Certification Request for Investigation Resale Agreement Resale Amendment Reservation Letter	
	Electric/Gas Electric/Telecor Electric/Water Electric/Water/I Electric/Water/S	nmunications		Agreement Answer Appellate Review Application Brief Certificate		Memorandum Motion Objection Petition Petition for Reconsidera Petition for Rulemaking	tion		Request Request for Certification Request for Investigation Resale Agreement Resale Amendment Reservation Letter Response	
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2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32790-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

Clerk's Office South Carolina Public Service Commission 101 Executive Center Dr. Columbia, SC 29210

RE: WiMacTel, Inc

SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative, filed on behalf of WiMacTel, Inc. No check is enclosed as there are no remittance fees due.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Marie Simpson

Compliance Reporting Specialist

file: WiMacTel, Inc - Reporting - South Carolina

MS/ca

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS TYPE: []IXC [X]CLEC [] ILEC [] Wireless

	CERTIFICATED COMPAN	Y INFORMATION			
WiMacTel, Inc.					
Company Name					
, ,		FEIIV/00IV 877-776-0042	*	**	
Dba/fka		Telephone #	 		
13515 I Circle		i cichiioile #			1.
Mailing Address				- +	
Omaha, NE 68137					
City, State, Zip Code					-
13515 I Circle					1
Business Location					
Omaha, NE 68137					
City, State, Zip Code		County			
	REGISTERED AGENT IN	FORMATION			
egistered Agent [.] Nationa	al Registered Agents, Inc.				
	Park Court, Suite 103				
runny Address2 Office	or ark Court, Suite 103				
ity, State, Zip Code: C	olumbia, SC 29223				
iant to the Commission	n's rules and regulations, print or	type company contact	for th	<u>e follo</u>	wing ar
James MacKenzie					
	clude Address if different than above)				
800-820-4680	/ 877-476-0890	/jmackenzie@wimacte	l.com		
Telephone Number	/ Facsimile Number	/ E-mail Address			
James MacKenzie					
800-820-4680	Complaints Representative (Include	Address if different than ab	ove)		
Telephone Number	/ 877-476-0890 / Facsimile Number	/ jmackenzie@wimacte	l.com		
James MacKenzie	/ Facsimile Number	/ E-mail Address			
	Complaints Representative for Escal	ated Complaints (Include	Addros	o if diffe	ront
man above)	The state of the s	atea complaints (melade	Addres	S II GIIIE	erent
800-820-4680	/ 877-476-0890	/ jmackenzie@wimacte	l.com		
Telephone Number	/ Facsimile Number	/ E-mail Address			
888-476-0881					
Customer Contact (T	oll Free Number)				
Engineering Operation	ons (Include address if different than ab	ovo)			
		/ /			
Telephone Number	/ Facsimile Number	/ E-mail Address			
Test and Repair (Inclu	ide address if different than above)				
Telephone Number	/ Foodimile Number	<u>/</u>			
James MacKenzie	/ Facsimile Number	/ E-mail Address			
Emergencies (During I 800-820-4680					
Telephone Number	/ 877-476-0890	/ jmackenzie@wimactel.	com		
relebuous mumber	/ Facsimile Number	/ E-mail Address			

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

James MacKenzie	Pro	esident, CEO, Treasurer and Secretary				
Regulatory Officer (Name	& Title)					
13515 l Circle, Omaha, NE	8137					
(Mailing Address) 800-820-4680	/ 077 470 0000					
Telephone Number	/ 877-476-0890 / Facsimile Number	/ jmackenzie@wimactel.com				
•		/ E-mail Address				
Marie Simpson Compliance Reporting Specialist						
Annual Report Mailings (Name & Title)						
P.O. Drawer 200, Winter Park, FL 32790-0200						
(Mailing Address)						
407-740-8575	407-740-0613	msimpson@tminc.com				
Telephone Number	/ Facsimile Number	/ E-mail Address				
Marie Simpson						
Dual Party Mailings (Name 8						
P.O. Drawer 200, Winter Park	, FL 32790-0200					
(Mailing Address)						
407-740-8575	/ 407-740-0613	/ msimpson@tminc.com				
Telephone Number	/ Facsimile Number	/ E-mail Address				
Marie Simpson	Con	mpliance Reporting Specialist				
Interim LEC Fund Mailings (Name & Title)					
P.O. Drawer 200, Winter Park, (Mailing Address)	FL 32790-0200					
407-740-8575	/ 407-740-0613	/ majmnaan@tmina aam				
Telephone Number	/ Facsimile Number	/ msimpson@tminc.com / E-mail Address				
Marie Simpson						
Universal Service Fund Maili	ngs (Nama & Title)	npliance Reporting Specialist				
P.O. Drawer 200, Winter Park,	FI 32790-0200					
(Mailing Address)	02,00 0200					
407-740-8575	/ 407-740-0613	/ msimpson@tminc.com				
Telephone Number	/ Facsimile Number	/ E-mail Address				
_Marie Simpson	Com	npliance Reporting Specialist				
Gross Receipts Mailings (Name & Title)						
P.O. Drawer 200, Winter Park, FL 32790-0200						
(Mailing Address)						
407-740-8575	/ 407-740-0613	/ msimpson@tminc.com				
Telephone Number	/ Facsimile Number	/ E-mail Address				
Marie Simpson Compliance Reporting Specialist						
Lifeline Mailings (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200						
(Mailing Address)						
407-740-8575	/ 407-740-0613	/ msimpson@tming/cg/m				
Telephone Number	/ Facsimile Number	/ E-mail Address //				
		Almut or				
This form was completed by	TECHNOLOGIES MANAGEMENT,					
	AS ATTORNEY-IN-FACT	1. 1				
Title	BY THOMAS M. FORTE	1 3/12/15				
THE		Date				

RETURN COMPLETED FORM TO:

Public Service Commission of SC **Docketing Department**Post Office Drawer 11649
Columbia, South Carolina 29211

<u>And</u>

Office of Regulatory Staff Attn: Jeanne Gordon 1401 Main Street, Suite 900 Columbia, South Carolina 29201